				N Z
1. PLACE OF BIRTH	ARIZONA STATE BO BUREAU OF VIT STANDARD CERTIF	AL STATISTICS	State File No	
County Zula		State		
District or Township		or Village		
2. Full name of child Rev	(If birth occurred in p	hospital or institution, giv	St,	ske 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3. Sex of Child To be answered Of in event of plural births.	5. No., in order of hir		7. Date Jef 20 1979 of birth Month Day Year	ENT
S PATHE	· · · · · · · · · · · · · · · · · · ·	14. Full maiden name	MOTHER Visas	
9. Residence (Usual place of those of the place and state	ufas	15. Residence (Usual place of a fill If non-resident, give	bustings	
18 Jolor or race	at last birthday 28 (Years)	16 golf or race	17. Age at last birthday / (Yes	rie)
12. Birthplace (city or place)	nci	1S. Birthplace (city or (State or country)	Comania Imana Mus	
13. Occupation Nature of industry	ger	19. Occupation Nature of industry	loun life	
20. Number of children of this worth (Taken as of time of birth of child be certified and including this child.)	oroin (b) Born alive	and now living but now dead	21. Were precautions taken against a that mis necessions ?	1953 H
	CERTIFICATE OF ATTENDIN		11/20	
I hereby certify that I attended the "When there was no attending phy or midwife, then the father, househ etc., should make this return. A stilchild is one that neither breathes shows other evidence of life after	sician older, bern nor	(Born alive Pattilbers)	Am, on the date above uta	ted.
Given name added from a supplemental report	y, year Filed MA	Haydan arch 8 1024	(Physician or midwife).	
Regis	1	0 .552	Registrar	

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